

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2/16
FORMALITY REVIEW	KQ	3051705	64-03-01
RESPONSE FORMALITY REVIEW	me	1030	7-10-01
	CC	50114	10-10-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	5/28/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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